

L16000211236

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H21000279939 3)))



H21000279939ABC9

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : GARDNER BREWER MARTINEZ-MONFORT, P.A.
Account Number : I20060000058
Phone : (813)221-9600
Fax Number : (813)221-9611

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
21 JUL 22 AM 11:55

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

**LLC REGISTERED AGENT RESIGNATION
ELEMENTS RESTORATION SOUTH CAROLINA, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

JUL 23 2021

A. LUNT

2021 JUL 22 PM 3:29

ALLAHASSEE, FLORIDA

(((H21000279939 3)))

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Elements Restoration South Carolina, LLC
Name of Limited Liability Company

DOCUMENT NUMBER: L16000211236

The enclosed Resignation of Registered Agent for a Limited Liability Company and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Christopher W. Brewer

Name of Person

Gardner Brewer Martinez-Monfort, P.A.

Name of Firm/Company

400 North Ashley Drive, Suite 1100

Address

Tampa, FL 33602

City/State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Christopher W. Brewer

Name of Person

at (

813

Area Code

221-9600

Daytime Telephone Number

Enclosed is a check made payable to the Florida Department of State for \$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

FILED
21 JUL 22 AM 11:55
SECRETARY OF STATE
DIVISION OF CORPORATIONS

INHS17 (2/14)

(((H21000279939 3)))

(((H21000279939 3)))

**STATEMENT OF RESIGNATION OF REGISTERED AGENT
FOR A LIMITED LIABILITY COMPANY**

Pursuant to the provisions of section 605.0115, Florida Statutes, the undersigned,

Christopher W. Brewer

Name of Registered Agent

, hereby resigns as

Registered Agent for Elements Restoration South Carolina, LLC

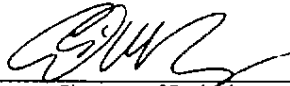
Name of Limited Liability Company

1.16000211236

Document Number, if known

A copy of this resignation was mailed to the above listed limited liability company at its last known address.

The agency is terminated and the office discontinued on the 31st day after the date on which this statement is filed.

_____
Signature of Resigning Agent

If signing on behalf of an entity:

Typed or Printed Name_____
Capacity**FILING FEES:**

\$ 85.00	Active limited liability company
\$ 25.00	Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

INHS17 (2/14)

(((H21000279939 3)))

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
21 JUL 22 AM 11:55